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<b>SERIAL NUMBER</b> 10/549,839	<b>FILING OR 371(c) DATE</b> 06/22/2006 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1617	<b>ATTORNEY DOCKET NO.</b> T1618P
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/GB04/00983 03/08/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED STATES OF AMERICA 60454589 03/14/2003

**IF REQUIRED, FOREIGN FILING LICENSE****GRANTED \*\* 07/18/2006**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 22	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u>/Renee Claytor/</u> RC Examiner's Signature Initials				

**ADDRESS**

210

**TITLE**

Method for treating mild cognitive impairment and for preventing or delaying alzheimer's disease

<b>FILING FEE RECEIVED</b> 1130	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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